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(Re	questor's Name)								
(Ad	dress)								
(Ad	dress)								
(6)	- /Ch-h- [7] - (Dh	- 40							
(City/State/Zip/Phone #)									
PICK-UP	WAIT	MAIL							
(Bu	siness Entity Nar	ne)							
(Do	cument Number)								
Certified Copies	Certificates	s of Status							
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Casalal Instructions to	Ciling Officer								
Special Instructions to	rilling Onicer.								





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12/17/20--01019--008 ++25.00

5. YOUNG





CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Erika Zavala Daza erika.zavaladaza@cscqlobal.com

Date: December 15, 2020

Order#: 544755/076

Re: SWC BROOKSVILLE BOTANICALS LLC

Enclosed please find:

XX __ Change of Registered Agent and Office.

XX _ Check in the amount of \$25 __.

Please take the following action:

XX __ File in your office on a routine basis.

XX ___ Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Erika Zavala Daza c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Na	ame of the limited liability company:	/ILLE B	OTA	NICALS	SLLC			
2. (a)	745 S BROAD ST	(b) 2203 N Lois Ave M275						
z. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ `	·/_		Mailing address of (Note: MAY B.			
	BROOKSVILLE, FL 34601	—		ampa, F	L 33607			
	04/17/2019		L19	9000099	9274			
3.	Date of filing/registration in Florida	4.		-	Document nur	nber		•
5. (a)	C T CORPORATION SYSTEM							
5. (a)	Registered Agent and Registered Office shown on the records of t	the Floric	la De	pt. of Stat	– e:			
	1200 SOUTH PINE ISLAND ROAD							
	Registered Office Address (MUST BE FLORIDA STREET A	1DDRES	<u>231</u>	-	_			
							~	
	PLANTATION	33324			-		2020 DEC	
	, FL				_		DEC	• • • •
4.5								4-6 -
(b)	Enter name of NEW Registered Agent and/or NEW Registered	Office a	ddre:	<u>ss</u> :	_		PH	· :
				_				e e wee
	Corporation Service Company						6: 3	
	NEW Registered Office Address:				_		σ	
	1201 Hays Street				_			
	Tallahassee, FL	32301			_			
change agent v was/w	imited liability company is not organized under the law e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	register ability c of the lir limited	red o omp nited liabi	office an any, it is d liabilit ility con	d the business of the business	office of th med that th	ne regis ne chan	tered ge(s)
	Xia E. CiQnia	Jill —	Ciln	ni, Autho	orized Person	-		
-	ture of a member or authorized representative of a member				Printed or typed	_		
provis the obi to mer	by accept the appointment as registered agent and agre ions of all statutes relative to the proper and complete ligations of my position as registered agent as provided ely reflect a change in the registered office address, I h d in writing of this change	ee to ac perforn I for in sereby c	et in i iance Cha confi	this cape e of my o pter 605 rm that	acity. I further duties, and I ar i, F.S. Or, if th the limited liab	agree to c n familiar is documen vility compo	comply with an nt is bei any has	with the d accept ing filed been
	Mace thinky							
Signatu Grace	re of Registered Agent E. Kriby, Asst. Vice President of Corporation Service Company							

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00